Data Collection

Data collection is a vital component of effective instructional programming for individuals with disabilities.



What does the process look like?

Select the appropriate data collection system → Implement the instructional strategies

What do the regulations say?

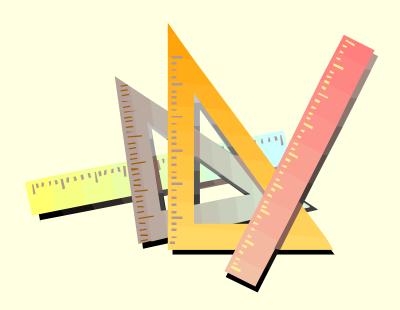


■ W237: The type of data and frequency of data collection necessary to be able to assess progress toward the desired objectives;

The data collection system is directly related to the outcome stated in the objective.

The facility must determine the type of data necessary to judge an individual's progress on an objective, and describe that data collection method in the written training program.

The facility determines what data to collect, but the system chosen must yield accurate measurement of the criteria stated in the individual's IPP objectives.

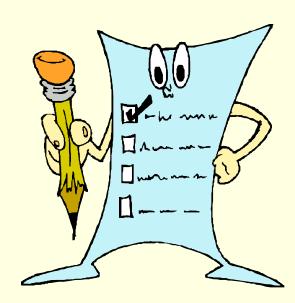


For example, if the criteria in the individual's IPP objective specified some behavior to be measured by "accuracy," or "successes out of opportunities," then it would not be acceptable for the prescribed data collection method to record "level of prompt."

Methods of data collection on IPP training programs should be based on the total (including direct care) facility's staff analysis and observations of an individual's behavior.



Examples of a few data collection systems include, but are not limited to, level of prompt, successful trials completed out of opportunities given, frequency counts, frequency sampling, etc.



The facility should collect data with enough frequency and enough content that it can measure appropriately the individual's performance toward the targeted IPP objective.

An instructional session may be structured so that it contains a predetermined number of trials (usually 10 to 20) without regard to how long it will take to complete them, or a predetermined number of minutes (usually 10 to 20) within which a varying number of trials may occur.

Generally, the first approach is used during the acquisition phase of instruction, and the second in a higher level of response competence (fluency and generalization). With the first approach, trial-by-trial data recording is usually employed; a data notation is recorded for each trial in which the learner engages.



With the second approach, a probe approach to data collection is usually employed.

After the predetermined number of minutes of instruction, a sample of the behavior is tested (probed), and the result of this performance is recorded as the data for the session.

Forms of Data

Two basic forms of data can be taken during instruction.

One is dichotomous data. When using dichotomous data, the teacher records only whether the learner performed the requested behavior correctly or incorrectly.



■ The other form of data collection indicates the instruction required for the learner to perform the requested behavior.

It is used when the teacher is employing a system of response prompting.



For each trial, the teacher can indicate the type of assistance that was necessary to enable the learner to perform the response.

For additional information refer to the "Prompt Systems" presentation.

What about data for maladaptive behaviors?



ABC Data

Data is typically collected in a narrative format and includes observational information about antecedents, maladaptive behavior(s), and subsequent consequences.

<u>Antecedent:</u> What happened before the maladaptive behavior occurred?

Behavior: What happened? What does the maladaptive behavior look like?

<u>Consequence:</u> What happened after the maladaptive behavior occurred? How did the learner respond?

Example of ABC Data:

Antecedent:

Susie sitting in the living room chair. She was watching her favorite show on television and eating caramel corn. Sally walked in the room and turned off the television.



Behavior:

Susie attempted to hit her head 5 times with her right fist.



Consequence:

Staff physically blocked all five hits. Sally was verbally prompted to turn on the television one time, which she did. Susie smiled and continued eating her caramel corn.



Okay, I selected the appropriate data collection system. What's next?



Implement instructional strategies!

What do the regulations say?



Implementing Instructional Strategies

W249: As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan.

Each individual is receiving training and services consistent with the current IPP.

Staff use the adaptive equipment, assistive devices, environmental supports, materials, supplies, etc., specified in each individual's IPP to accomplish stated objectives.

A consistent approach is being implemented in all environments.

W252: Data relative to accomplishment of the criteria specified in client individual program plan objectives must be documented in measurable terms.



Data are collected in the form and frequency required by the plan and data are accurate, i.e., reflective of actual individual performance.

Data collected yield information relevant to making program decisions.



What comes after data collection?

See the presentation on Data Analysis for the answer!





Send us your comments or questions at fsb@dhw.idaho.gov